

Exhibit No. 6Date 2-14-07Bill No. SB 368Amendments to Senate Bill No. 368
1st Reading Copy

Requested by Senator John Esp

For the Senate Public Health, Welfare and Safety Committee

Prepared by Lisa Mecklenberg Jackson
February 14, 2007 (2:49pm)

1. Title, page 1, line 5.

Following: "GROUP;"**Insert:** "PROVIDING GUIDELINES FOR QUALITY ASSURANCE REVIEWS;"

2. Page 3, following line 2.

Insert: "NEW SECTION. Section 5. Medical practice group quality assurance guidelines -- reviews. (1) Reviews conducted by a medical practice group under this section must comply with the following guidelines:

(a) A random review is a review of at least 10 randomly selected patient charts, which must be reviewed by a quality assurance committee of the medical practice group. The committee may gather data from any source for purposes of the review. The committee shall submit an evaluation report to the medical practice group outlining the review findings and recommending changes if changes are determined necessary.

(b) A focused review is intended for specific clinical and quality improvement purposes, such as:

(i) reviewing patient medical records relating to a certain disease or procedural category for purposes of comparing documented treatment to available and current standards of medical care;

(ii) assessing the efficacy and efficiency of an office procedure or process related to clinical care; or

(iii) reviewing office and clinical practices prompted by an analysis and results of incident reports.

(c) An incident review performed by a medical practice group quality assurance committee is for purposes of gathering data, investigating, conducting analysis, coordinating all responses, and recommending and initiating corrective action as necessary, connected with a specific incident involving the delivery of medical care to a patient of the medical practice group.

(2) Reviews conducted by a medical practice group under this section must be based on appropriateness, medical necessity, adequacy of documentation, and efficiency of services. The physician being reviewed must be immediately advised of the findings of the committee to further the educational process for the physician. The medical practice group is responsible for

documenting any corrective action that is taken and any policies, procedures, or clinical processes that are changed, who is responsible for implementing the changes, and how the medical practice group will ensure that the changes are made.

(3) All data relating to quality assurance committee activities under this section must be maintained in a confidential location separate from patient medical records.

(4) A medical practice group may contract with a group or organization composed of persons licensed to practice a health care profession or with a nonprofit corporation engaged in performing the functions of a peer review committee, medical ethics review committee, or professional standards review committee for purposes of conducting any review allowed under this section."

Insert: "NEW SECTION. **Section 6. {standard} Codification instruction.** [Section 5] is intended to be codified as an integral part of Title 50, chapter 16, part 2, and the provisions of Title 50, chapter 16, part 2, apply to [section 5]."

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